### 1919.



## Boston Rural District.

# Annual Report

OF

The Medical Officer of Health,

#### **BOSTON:**

Wing and Co. Ltd., Printers, Bargate, 1920.



### ANNUAL REPORT, 1919.

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The Members of the Boston Rural District Council.

Mr. CHAIRMAN AND GENTLEMEN,

I have pleasure in presenting you with my Annual Report for 1919.

#### POPULATION.

Census,	1911		 	21,059
Estimate	ed for	1919	 	22,002

### PHYSICAL FEATURES AND GENERAL CHARACTER OF DISTRICT.

The District is low lying, flat and almost entirely devoted to agriculture.

Owing to its close approximation to sea level it is naturally a damp district and drainage is always difficult.

#### VITAL STATISTICS.

Nett Births	442
Nett Deaths	319
Birth-rate	20.1
Death-rate	14.5

The birth-rate is thus seen to be lower than usual and the death-rate somewhat higher. This latter I attribute in great part to Influenza and an increase in Cancer, the death-rates for which are:—

Influenza	 1.00
Cancer	 2.00

Nevertheless these figures compare very favourably with those for the whole of England and Wales in 1918, which were birth-rate 17.7 and death-rate 17.6.

Water Supply.—The bulk of the District derives its water supply from rain-water collected from the roofs of the houses and stored in cisterns, also from shallow wells. The former for drinking purposes and the latter for general use.

Owing to the scattered nature of the District this method of water supply is unavoidable.

Unfortunately some persons will persist in using water from shallow wells for drinking purposes; this is a most dangerous habit as shallow wells are nearly always contaminated. This custom was in my opinion directly responsible for the three cases of Typhoid Fever which occurred in the District this year

Parts of Skirbeck on the other hand are supplied with water (surface water), collected at Revesby, properly filtered through filter-beds and distributed through iron mains. This water supply is in general of good quality, but in dry summers is apt to be deficient in quantity.

**Drainage and Sewerage.**—The drainage of the District is satisfactory, but the disposal of sewage is di.ficult.

Most of the sewage is disposed of by means of privys. It will be greatly to the advantage of your District when water-closets can be substituted for privys in the more populous parts: and in this connection I refer especially to Skirbeck and Skirbeck Quarter.

**Scavenging**.—There have been many complaints as to the way this is carried out in Skirbeck.

New arrangements are probably to be made by you in the ensuing year, which will, I trust, remedy this in future.

Arrangements should in future bring the scavenging more directly under the supervision of your Council.

A Refuse Destructor would be a great asset to the District.

Milk Supply.—The milk supply is ample and of good quality.

Dairies and cowsheds are maintained in a satisfactory condition.

Supply to Mothers and Children.—Under 1918 orders you are empowered to supply milk to expectant mothers or young children. In your District this will not often prove to be necessary.

Up to the present milk is only supplied to necessitous cases on my recommendation and with your sanction.

Infectious Diseases.—There were 29 cases of Measles, 15 of Scarlet Fever, 13 of Diphtheria, 3 of Enteric, 4 of Ophthalmia Neonatorum, 1 of Erysipelas, 1 of Puerperal Fever and 1 of Encephalitis Lethargica. This I consider to be very satisfactory for so large an area.

Enteric Fever.—All three cases occurred in one house at Pelham's Lands and were probably due to drinking water from the dyke, the rain-water supply having run out.

Encephalitis Lethargica.—This is a comparatively recently discovered disease, which, in the majority of cases proves rapidly fatal. It is characterised by paralysis and drowsiness. As yet it is not known how it spreads or what causes it, but it does not appear to be directly infectious. The one case notified in Skirbeck was a doubtful case and may easily have been a case of some other less deadly disease.

Pneumonia, Malaria, Dysentery and Trench Fever.—No cases of these diseases have been notified to me.

**Small Pox.**—Five persons were notified to me as coming into the District after recently being in contact with cases of small pox.

These people were all kept under observation for a time, but happily did not in any case develop the disease.

Diphtheria.—There is considerably less of this disease in recent years,

Medical Practitioners are very ready to avail themselves of the right to have bacterial examinations made to assure themselves that the patient is free from infection. These examinations are carried out at a small cost to the Council and aid to a very great extent to prevent the spread of the disease.

In one case this year swabs showed infection present on two separate occasions after it was presumed that the patient was cured. Had these swabs not been taken the patient would have been set at liberty before free of infection and many further cases might have resulted.

**Tuberculosis.**—From the notifications received, this disease would appear to be on the increase.

32 cases of Pulmonary Tuberculosis and 5 cases of other forms of Tuberculosis were notified. However I consider that this increase is more apparent than real, as the death-rate from Tuberculosis does not show a corresponding increase.

It is probably mainly due to a greater readiness on the part of doctors to notify the disease now that it is possible in so many cases to get sanatorium treatment at an early stage. Arrangements for dealing with Tuber-culosis.—These are carried out by the County Council.
The arrangements consist of:—

- 1 -Providing additional food, chiefly milk.
- 2-Providing open-air shelters.

I believe that sanatorium treatment will also be provided in the near future.

Thanks to the Insurance Act, insured persons are now able to obtain proper treatment at an early stage.

Infantile Mortality.—The nett deaths under one year of age were 40, which gives a death-rate of 90.5 per 1000 births. This is in no way excessive and compares favourably with the total death-rate.

No fewer than 19 of the 40 deaths recorded were due to premature birth, congenital debility, etc. Thus 21 deaths were due to disease.

This indicates a high standard of infant care in the District.

Isolation Hospital.—This is capable of accommodating about 40 cases in an emergency.

There is accommodation for 17 in the main building and for 12 in each of the other two blocks. During the year 13 cases of infectious disease from the Rural District were treated at the Fever Hospital.

### CAUSES OF DEATH IN BOSTON RURAL DISTRICT, 1919.

			KOKAL DI	31 (ICI, 1919.
Causes of De	ATH.		Number.	RATE PER 1000
All Causes			319	14.5
1-Enteric Fever		•••		Provinces
2—Small Pox		***	-	-
3—Measles		* * *	_	darma,
4Scarlet Fever				
5—Whooping Cough				
6—Diphtheria				_
7—Influenza			<b>22</b>	1
8—Erysipelas				
9-Pulmonary Tubercu		• • •	18	·81
10—Tuberculous Mening		•••	6	·23
11—Other Tuberculous I	Diseas	ses	7	·23
12—Cancer			48	2.00
13—Rheumatic Fever		• • •	1	.05
14—Meningitis		• • •	4	·18
15—Heart Disease		• •	29	1.28
16—Bronchitis	• • •		16	·12
17—Pneumonia		• • •	10	.50
18-Other Respiratory D	isease	es		C-yart
19—Diarrhœa			8	-86
20—Appendicitis			1	.05
21—Cirrhosis of Liver			2	.09
22—Nephritis			10	.50
23—Puerperal Fever		• •		
24—Parturition			attempoles	-
25-Congenital Debility,	&c.		19	·81
26-Violent Deaths (not S			10	-50
27—Suicides			8	·14
28-Other defined Diseas			42	1.95
29—Ill-defined Diseases	• •	* * *	17	.77
80—Old Age		* * *	51	2.82
Deaths of Infants under 1			40	1.90
773			217 (	
Female	• • •		225	20.1
Estimated Population		***	22,002	

Housing.—The housing arrangements of the District are not at present in a very satisfactory condition, in great part, owing to the late war, which has prevented the proper carrying out of repairs and put a stop to new building.

The number of houses in the District is 5,042, of which 4,300 are for the working classes.

The population at the last census was 21,057 and is now probably about 22,000.

There is at present a distinct shortage of houses and you have already taken steps to remedy this. You contemplate building a further 200 houses as and when possible; already sites have been selected, approved and marked out for new houses, and tenders have been asked for in some cases, but as yet no building has been commenced.

Overcrowding.—There is no marked or general overcrowding.

Fitness of Houses.—The existing houses in the District are not in a very good state.

Many of them are old and possess only limited lighting as regards windows.

A very large number have been built without dampproof courses and as a result of this and the low lying character of the District are damp. In addition house repairs have fallen into arrears during the war.

There are a considerable number of houses that should be condemned as unfit for habitation, but it is useless to do this until new houses are built.

Two houses were closed as unfit for habitation in 1919.

Three new houses were privately built and approved in the year.

The Sanitary Inspectors Report is appended at the end of mine.

## S. SHUTTLEWORTH RENDALL, M B., Medical Officer of Health.

## BOSTON RURAL DISTRICT COUNCIL, NUISANCES ABATED AND WORKS CARRIED OUT BY THE SANITARY INSPECTOR.

For the Year ending 31st December, 1919.

Defective drains remedied	• • • • • • • • • • • • • • • • • • • •	1 77
Drains trapped		17
New house drains constructed		5
New water supplies provided to occupied houses		4
Damp and delapidated houses repaired and ventilated	• • • •	7
		8
Filthy house cleansed and limewashed		I
Defective yards asphalted or concreted	• • •	13
Privys converted into slop closets	•••	43
Defective slop closet repaired		7
Ashbins repaired	* * .	- 10
Offensive ditch filled up		I

Privys abut	ting on hou	ses remov	ed and i	new ones	erected		2
Houses clos	sed as unfit	for habitat	ion				2
Defective c	isterns repa	ired			***		5
Privys repa	ired			• • •	• • •		10
Knackers p	remises reb	uilt		•••	• • •		1
		WORE	KSHOP	S.			
Workshops limewashed							
New closet	erected for	workshop				٠.	I
	COW	SHEDS	AND	DAIRH	ES.		
Cowstables	limewashed	d					23
, ,	drained, lig		ventilate	ed		••	+
, ,	new water						2
,,	closed rath	er than do	the wo	rk requir	ed		3
					Total		200
					10(4)	* • •	
New houses	s examined	for certific	ates re v	vater sup	ply	• • •	3
Works outs	standing and	d in course	of com	pletion			49
							_
Houses dis	infected for			• • •			9
, ,		Diphtlieria		• • •	• • •	•••	10
21	* *	Phthisis					16
, ,	**	Influenza		. •	* * *	• • •	I
٠,	"	Variola Co	ontact	•••	***	•••	I
							37
	1 7	0	1.4	T	٠, ,		_
Cases of So	carlet Fever	, &c., remo		Fever H	ospital,	VIZ.: Variola	
		Influenz	Scarlet a. Fever.	Diphtheria,	Enteric.	Contact.	Total.
	Wyberton			I			I
• •	Pelham's L Skirbeck	ands i	6	1	3		3 8
	Sutterton					I	I
		_	_	_	-		_
		I	6	2	3	1	13
			101	IN STE	DHEN	SON	
•			101	IN SIL	TIEN	501V.	

Sanitary Inspector.

12th April, 1920.